1291045 **HECEIVE** UNITED STATES FORM D RITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D hours per response. 16.00 ICE OF SALE OF SECURITIES SEC USE ONLY PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION Name of Offering (check if this is an amendment and name has changed, and indicate change.) Private offering of limited partnership interests Filing Under (Check box(es) that apply): Rule 504 ☐ Rule 505 ▼ Rule 506 ▼ Section 4(6) ☐ ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) RegentAtlantic Absolute Return Fund, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) c/o RegentAtlantic Hedge, LLC, One Main Street, Chatham, NJ 07928 973-635-7070 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Same Same

Brief Description of Business Private investment fund

Type of Business Organization corporation

business trust

limited partnership, already formed limited partnership, to be formed

other (please specify)

Actual or Estimated Date of Incorporation or Organization: 0 2 0 4 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Actual Estimated

 $\mathbf{D}[\mathbf{E}]$

CN for Canada; FN for other foreign jurisdiction)

Year

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

	A. BASIC IDENT	IFICATION DATA		
 Enter the information requested for the following Each promoter of the issuer, if the issuer ha Each beneficial owner having the power to vo Each executive officer and director of corpo Each general and managing partner of partner 	s been organized within ote or dispose, or direct trate issuers and of corp	the vote or disposition o		
Check Box(es) that Apply: R Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or
RegentAtlantic Hedge, LLC				Managing Partner
Full Name (Last name first, if individual)				
One Main Street, Chatham, NJ 07928				
Business or Residence Address (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply: Promoter Cordaro, Christopher J.	Beneficial Owner X	Executive Officer	⋉ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
c/o RegentAtlantic Hedge, LLC, One Main Stree	et, Chatham, NJ 079	28		
Business or Residence Address (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Bugen, David H.	_	•	_	Managing Partner
Full Name (Last name first, if individual)				
c/o RegentAtlantic Hedge, LLC, One Main Stre	et, Chatham, NJ 079	28		
Business or Residence Address (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Knox, William T., IV	_	•	_	Managing Partner
Full Name (Last name first, if individual)				
c/o RegentAtlantic Hedge, LLC, One Main Stree	et, Chatham, NJ 079	28		
Business or Residence Address (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Morrison, Debra L.	_	•	_	Managing Partner
Full Name (Last name first, if individual)				Al-
c/o RegentAtlantic Hedge, LLC, One Main Stree	et, Chatham, NJ 079	28		
Business or Residence Address (Number and Street,	City, State, Zip Code)			
	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Stuart, Edward M.				
Full Name (Last name first, if individual)	. 01	••		
c/o RegentAtlantic Hedge, LLC, One Main Stree		28		
Business or Residence Address (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply: R Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Van Horne, Richard H.	_	_	_	Managing Partner
Full Name (Last name first, if individual)				
14 Dunnder Drive, Summit NJ 07901				

Business or Residence Address (Number and Street, City, State, Zip Code)

					В. П	NFORMATI	ION ABOU	T OFFERI	NG	,			
1.	Has the	issuer sole	d, or does th	he issuer ir	ntend to se	ll. to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No 🗶
-			-, -, -,			Appendix,		•		_		ت	(A)
2.	What is	the minim	um investn	nent that w	ill be acce	pted from a	ıny individ	ual?				<u>\$ 150,</u>	000
3.	Does th	e offering	permit join	t ownershi	n of a sina	le unit?						Yes	No
3. 4.			tion request									×	
	commis If a pers or states	sion or sim on to be lis s, list the na	ilar remune sted is an ass ame of the b you may s	ration for s sociated pe roker or de	solicitation erson or age ealer. If mo	of purchase ent of a brok ore than five	ers in conne ter or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state		
Ful N		Last name	first, if ind	ividual)									
		Residence	Address (N	lumber and	d Street, C	ity, State, Z	Cip Code)						
Na	me of Ass	sociated Bi	oker or De	aler									
Sta	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	•••••			••••••	•••••		All States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
	11 Name of C		C:, :C:_, 3	:: d									
rui	n Name (.	Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	sociated Br	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers		<u> </u>				
	(Check	"All State:	s" or check	individual	States)		***************************************		*************	***************************************		☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful			first, if ind										
1 111	ii ivaine (.	Last Haine	mst, mma	ividuai)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	sociated Br	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	••••	······	******				☐ Al	l States
	AL	AK	AZ	AR	CA	CO	<u>CT</u>	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0	\$ 0
	Equity	s 0	\$ 0
	Common Preferred		
	Convertible Securities (including warrants)	\$ O	\$ 0
	Partnership Interests		\$ 3,000,000
	Other (Specify)		\$ 0
	Total		\$ 3,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.		T
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Number Investors	of Purchases
	Accredited Investors	10	\$ 3,000,000
	Non-accredited Investors		\$ 0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	,	\$
	Regulation A		\$\$
	Rule 504		\$\$
	Total		\$ \$
1	·		φ
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	x	\$_0
	Printing and Engraving Costs	x	\$_0
	Legal Fees	x	\$ 30,000
	Accounting Fees	X	\$_0
	Engineering Fees	X	\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)	x	\$ <u>0</u>
	Other Expenses (identify) Copying, printing, postage, telecommunication, miscellaneous	x	\$ 20,000
	Total	x	\$ 50,000

5.	and total expenses furnished in response to Part C proceeds to the issuer."		•••••			\$ 99,950,000	
	each of the purposes shown. If the amount for check the box to the left of the estimate. The tot proceeds to the issuer set forth in response to	al of the payments listed	must eq				
					Payments to		
					Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees				🗶 \$_0	x \$ 0	
	Purchase of real estate				x \$ <u>0</u>	<u>x</u> \$_0	
	Purchase, rental or leasing and installation of	machinery					
and equipment							
	Construction or leasing of plant buildings and				🗶 \$ <u>0</u>	<u>x</u> \$ <u>0</u>	
	Acquisition of other businesses (including the offering that may be used in exchange for the			this			
	issuer pursuant to a merger)				x \$ <u>0</u>	\$ 0	
Repayment of indebtedness					🕱 💲 0		
	Working capital						
	Other (specify):					_	
					🕱 \$_0	<u>x</u> \$ <u>0</u>	
	Column Totals				🗷 \$_0	\$ 99,950,000	
	Total Payments Listed (column totals added)	\$ 99,950,000					
_		D. FEDERAL S	IGNAT	TURE			
sig	e issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to information furnished by the issuer to any non	furnish to the U.S. Sec	urities a	and Exchange Com	mission, upon writt		
Iss	ssuer (Print or Type) Signature 0			Date			
Re	gentAtlantic Absolute Return Fund, L.P.	tric	U.	Brile	May 11, 2004		
Na	me of Signer (Print or Type)	Title of Signer (Pr	rint or 7				
Eric A. Brill Attorney in fact for Christopher J. Cordaro, Manag					ager of Regent Atlant	ic Hadge L.I.C (GP of ice	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS